

Long Term Care Call 3.3.21

This call is not intended for the press or for reporting purposes.

Visitation - guidance based on the Center for Medicare and Medicaid Services (CMS) revised guidance September 17, 2020 (QSO-20-39-NH)

- Facilities must have a plan with policies and procedures in place to ensure personcentered visitation is reasonably allowed.
- Visitation may occur safely and based on the community (county) test positivity rate, the absence of COVID-19 within the facility, and the core principles of COVID-19 infection prevention.
- DOH Staff will conduct a visitation phone survey.
- Lack of visitation in a facility without adequate reasoning may indicate a Resident Rights concern.
- State of South Dakota Back to Normal Long-Term Care Reopening Plan Revised September 25, 2020
- The guidance represents reasonable ways a NH and ALC can facilitate in-person visitation.

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Percent Positive and Tests in prior 14 days:

A County CD	4C003 CD	0	2.751	Nan ann	22	020	4.20/	C
Aurora County, SD	46003 SD	8		Non-core	23	836		Green
Beadle County, SD	46005 SD	8		Micropolitan	48	260		Yellow
Bennett County, SD	46007 SD	8		Non-core	54	1,605		Green
Bon Homme County, SD	46009 SD	8		Non-core	53	768		Green
Brookings County, SD	46011 SD	8		Micropolitan	395	1,126		Green
Brown County, SD	46013 SD	8		Micropolitan	406	1,045		Yellow
Brule County, SD	46015 SD	8		Non-core	33	623		Green
Buffalo County, SD	46017 SD	8		Non-core	<20 tests	<20 tests	<20 tests	
Butte County, SD	46019 SD	8		Non-core	159	1,525		Yellow
Campbell County, SD	46021 SD	8		Non-core	29	2,108		Green
Charles Mix County, SD	46023 SD	8		Non-core	107	1,152		Yellow
Clark County, SD	46025 SD	8		Non-core	31	830		Green
Clay County, SD	46027 SD	8	14,070	Micropolitan	50	355	2.0%	Green
Codington County, SD	46029 SD	8	28,009	Micropolitan	86	307	2.3%	Green
Corson County, SD	46031 SD	8	4,086	Non-core	27	661	14.8%	Yellow
Custer County, SD	46033 SD	8	8,972	Small metro	94	1,048	10.6%	Yellow
Davison County, SD	46035 SD	8	19,775	Micropolitan	228	1,153	4.4%	Green
Day County, SD	46037 SD	8	5,424	Non-core	<20 tests	<20 tests	<20 tests	Green
Deuel County, SD	46039 SD	8	4,351	Non-core	20	460	0.0%	Green
Dewey County, SD	46041 SD	8		Non-core	28	475		Yellow
Douglas County, SD	46043 SD	8		Non-core	<20 tests	<20 tests	<20 tests	
Edmunds County, SD	46045 SD	8		Micropolitan	32	836		Yellow
Fall River County, SD	46047 SD	8		Non-core	121	1,802		Yellow
Faulk County, SD	46049 SD	8		Non-core	25	1,002		Green
Grant County, SD	46051 SD	8		Non-core	82	1,163		Yellow
Gregory County, SD	46053 SD	8		Non-core	58	1,386		Yellow
Haakon County, SD	46055 SD	8		Non-core	<20 tests	<20 tests	<20 tests	
Hamlin County, SD	46057 SD	8		Non-core	<20 tests	<20 tests	<20 tests	
Hand County, SD	46059 SD	8	.,	Non-core	48	1,504		Yellow
Hanson County, SD	46061 SD	8		Micropolitan	37	1,072		Yellow
		8			<20 tests		<20 tests	
Harding County, SD	46063 SD 46065 SD	8		Non-core	266	<20 tests 1.518		
Hughes County, SD				Micropolitan		,		Green
Hutchinson County, SD	46067 SD	8		Non-core	108	1,481		Yellow
Hyde County, SD	46069 SD	8		Non-core	<20 tests	<20 tests	<20 tests	
Jackson County, SD	46071 SD	8		Non-core	<20 tests	<20 tests	<20 tests	
Jerauld County, SD	46073 SD	8		Non-core	<20 tests	<20 tests	<20 tests	
Jones County, SD	46075 SD	8		Non-core	<20 tests	<20 tests	<20 tests	
Kingsbury County, SD	46077 SD	8		Non-core	56	1,134		Green
Lake County, SD	46079 SD	8		Non-core	67	524		Green
Lawrence County, SD	46081 SD	8		Micropolitan	543	2,101		Green
Lincoln County, SD	46083 SD	8		Small metro	814	1,332		Yellow
Lyman County, SD	46085 SD	8	3,781	Non-core	<20 tests	<20 tests	<20 tests	
Marshall County, SD	46091 SD	8	4,935	Non-core	46	932		Yellow
McCook County, SD	46087 SD	8	5,586	Small metro	52	931	7.7%	Yellow
McPherson County, SD	46089 SD	8	2,379	Non-core	148	6,221	0.0%	Green
Meade County, SD	46093 SD	8		Small metro	351	1,239	11.7%	Yellow
Mellette County, SD	46095 SD	8	2,061	Non-core	<20 tests	<20 tests	<20 tests	Green
Miner County, SD	46097 SD	8	2,216	Non-core	<20 tests	<20 tests	<20 tests	Green
Minnehaha County, SD	46099 SD	8	193,134	Small metro	3,843	1,990	4.6%	Green
Moody County, SD	46101 SD	8	6,576	Non-core	53	806	5.7%	Yellow
Oglala Lakota County, SD	46102 SD	8		Non-core	36	254		Yellow
Pennington County, SD	46103 SD			Small metro	1,466	1,289		Yellow
Perkins County, SD	46105 SD	8	2,865	Non-core	<20 tests	<20 tests	<20 tests	
Potter County, SD	46107 SD	8		Non-core	61	2,833	11.5%	
Roberts County, SD	46109 SD	8		Non-core	49	471		Yellow
Sanborn County, SD	46111 SD	8		Non-core	<20 tests	<20 tests	<20 tests	
Spink County, SD	46115 SD	8		Non-core	112	1,757		Yellow
Stanley County, SD	46117 SD	8		Micropolitan	41	1,323		Green
Sully County, SD	46119 SD	8		Micropolitan	30	2,157		Green
Todd County, SD	46121 SD	8		Non-core	21	206		Green
Tripp County, SD	46121 SD 46123 SD	8		Non-core	32	588		Yellow
		8			38	453		
Turner County, SD	46125 SD			Small metro				Yellow
Union County, SD	46127 SD	8		Small metro	286	1,795		Yellow
Walworth County, SD	46129 SD	8		Non-core	90	1,656		Yellow
Yankton County, SD	46135 SD	8		Micropolitan	307	1,346		Green
Ziebach County, SD	46137 SD	8	2,756	Non-core	<20 tests	<20 tests	<20 tests	Green

Data.CMS.gov

Data from February 11-February 24

Or

https://doh.sd.gov/COVID/Dashboard.aspx

County	Test Positivity Rate		
Green	Monthly	38	58%
Yellow	Weekly	27	41%
Red	2 X Weekly	1	2%
	Counties	66	
Nursing	Home Testing/Visitation		
Green	Monthly	52	50%
Yellow	Weekly	51	49%
Red	2 X Weekly	1	1%
	Nursing Homes	104	



Community (County) Test Positivity Rate

- Low (<5%) = **Visitation should occur** according to the core principles of COVID-19 infection prevention and facility policies (**beyond** compassionate care visits)
- Medium (5% 10%) = Visitation should occur according to the core principles of COVID-19 infection prevention and facility policies (beyond compassionate care visits)
- High (>10%) = Visitation should only occur for **compassionate care situations** according to the core principles of COVID-19 infection prevention and facility policies



Compassionate Care — for counties over 10% test positivity rate

Source: CMS Frequently Asked Questions – October 6, 2020

While end-of-life situations have been used as examples of compassionate care situations, the term "compassionate care situations" **does not exclusively refer to end-of-life situations**. Examples of other types of compassionate care situations include, **but are not limited to**:

- A resident, who was living with their family before recently being admitted to a nursing home, is struggling with the change in environment and lack of physical family support.
- A resident who is grieving after a friend or family member recently passed away.
- A resident who needs cueing and encouragement with eating or drinking, previously provided by family and/or caregiver(s), is experiencing weight loss or dehydration.
- A resident, who used to talk and interact with others, is experiencing emotional distress, seldom speaking, or crying more frequently (when the resident had rarely cried in the past).

Allowing a visit in these situations would be consistent with the intent of, "compassionate care situations." Also, in addition to family members, compassionate care visits can be conducted by any individual that can meet the resident's needs, such as clergy or lay persons offering religious and spiritual support.

Furthermore, the above list is not an exhaustive list as there may be other compassionate care situations not included.

The Core Principles of COVID-19 Infection Prevention

The Core Principles of COVID-19 Infection Prevention

- **Screening** of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions or observations about signs or symptoms), and denial of entry of those with signs or symptoms
- **Hand hygiene** (use of alcohol-based hand rub is preferred)
- Face covering or mask (covering mouth and nose)
- Social distancing at least six feet between persons
- Instructional signage throughout the facility and proper visitor education on COVID19 signs and symptoms, infection control precautions, other applicable facility practices (e.g., use of face covering or mask, specified entries, exits and routes to designated areas, hand hygiene)
- Cleaning and disinfecting high frequency touched surfaces in the facility often, and designated visitation areas after each visit
- Appropriate use of Personal Protective Equipment (PPE)
- Effective cohorting of residents (e.g., separate areas dedicated COVID-19 care)
- Resident and staff testing are accessible

PPE and BinaxNOW are available to facilitate visitation in LTC

To facilitate visitation please contact:

- ✓ PPE email a request form to <u>COVIDResourceRequests@state.sd.us</u> OR call 605.773.3048 and requesting entities must provide information regarding their current facility status.
- ✓ BinaxNOW Testing Kits Please send an email to Cindy Koopman-Viergets at Cindy.KoopmanViergets@state.sd.us_
- ✓ Please look at your BinaxNOW expiration dates.
- ✓ Use kits with the earliest expiration date first.





Re-admission/ New Admission Guidance - CDC

Create a Plan for Managing New Admissions and Readmissions Whose COVID-19 Status is Unknown.

- Depending on the prevalence of COVID-19 in the community, this might include placing the resident in a single-person room or in a separate observation area so the resident can be monitored for evidence of COVID-19.
- HCP should wear an N95 or higher-level respirator (or facemask if a respirator is not available), eye protection (i.e., goggles or a face shield that covers the front and sides of the face), gloves, and gown when caring for these residents.
- Residents can be transferred out of the observation area to the main facility if they remain afebrile and without symptoms for 14 days after their admission.
- Testing at the end of this period can be considered to increase certainty that the resident is not infected.

https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html



Re-admission/ New Admission Guidance - CMS

CMS – qso-20-38-nh – COVID-19 Focused Survey

- Does the facility have a plan (including appropriate placement and PPE use) to manage residents that are new/readmissions under observation, those exposed to COVID-19, and those suspected of COVID-19?
- Are these actions based on national (e.g., CDC), state, or local public health authority recommendations?

https://www.cms.gov/files/document/qso-20-38-nh.pdf



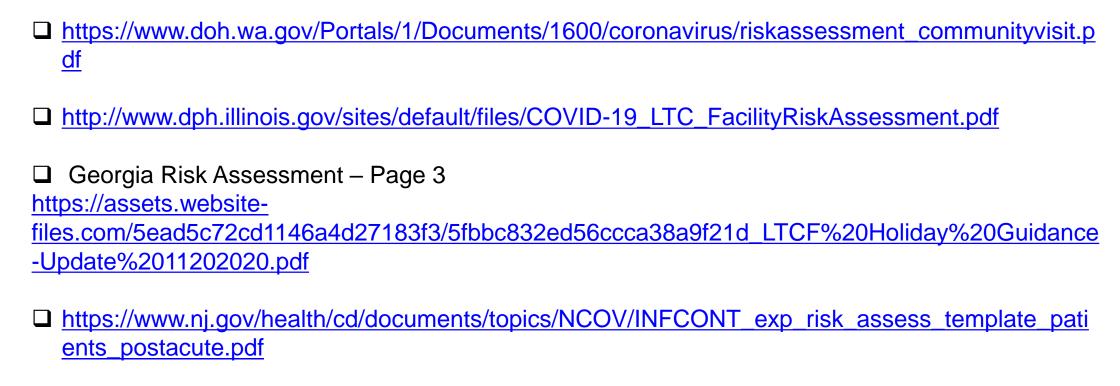


Risk for Residents after Community/Medical Visits

Assess risk of visit, and place patient in most appropriate location upon return.



Risk Assessment Examples





PPE

Green zone: Universal masking (this is the well-fitting hospital grade facemask) should be implemented if there is community spread of COVID.

- The addition of eye protection for staff working in all patient care zones will be based on *community* transmission rates.
- https://www.cdc.gov/coronavirus/2019ncov/hcp/infection-control.html
- https://www.cdc.gov/coronavirus/2019ncov/hcp/infection-controlrecommendations.html (halfway down the page for PPE use strategies)

Using Eye Protection

Use of eye protection is recommended in areas with moderate to substantial community transmission. For areas with minimal to no community transmission, eye protection is considered optional, unless otherwise indicated as part of standard precautions.

See the Guidance



YELLOW or RED Zone (Quarantine or COVID unit)

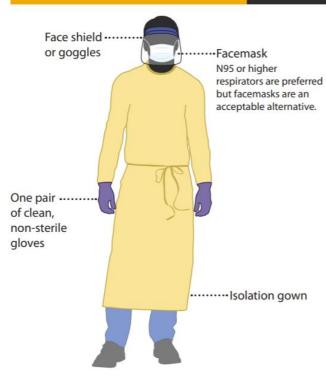
- **Yellow zone:** You want to use all PPE with this group as if they have COVID until they prove otherwise to reduce the risk of spread. This PPE includes: gown, gloves, facemask OR respirator (N-95 if available) and eye protections.
- * Red Zone: Is the same as the yellow zone. As always, N-95 or higher respirator is preferred in the COVID unit.

COVID-19 Personal Protective Equipment (PPE) for Healthcare Personnel

Preferred PPE – Use N95 or Higher Respirator



Acceptable Alternative PPE – Use Facemask



cdc.gov/COVID19

https://www.cdc.gov/coronavirus/2019-ncov/downloads/COVID-19 PPE illustrationsp.pdf